

TOWN OF MILLVILLE 36404 Club House Road, Millville, DE 19967 TEL (302) 539-0449 www.millville.delaware.gov

Public Event Permit No.				
To be supplied by Event Applicant				
., ,				
Date of Event:				

TAMESTICO TO	MOBILE FO	OD VENDOR PE	RMIT APPLICATION	
	TODA	Y'S DATE:		
	Mobile Food Vendo	or permit is \$1	5.00 per day, per event	
Name of Vendor:				
Mobile Tag No.:	State:	VIN:	Federal Tax ID:	
Owner/Corporation Na	me:		Telephone No.:	
 application: Your current Sta Proof of current Permit; Copy of current Copy of current A map of the dowithin ten (10) for Certificate of Get Town as an "addition" 	te of Delaware Mobile For and satisfactory compliant registration for the motor owner's driver's license; esignated location, include feet of the mobile food ver eneral Commercial Liabilit ditional insured."	od License; ance with the De r vehicle; ding any associate andor and does no cy Insurance with	lowing documentation must be laware Department of Public Health ed furniture (that may be allowed so impede pedestrian or vehicular train a minimum coverage amount of \$100, are accurate and complete:	Food Establishment o long as it is located ffic);
Signature of Owner or	Agent		Printed Name	
I/We swear or affirm und (Initial) I/We will f	ler penalty of perjury that forever indemnify and holo amages, losses, suits and a	t all the informat d harmless the To	hapter 90 of the Town of Millville Cocion provided on this permit application provided all its agents, employees and attorney's fees, arising or resulting	on is true and correct. d representatives from
	ck; Visa/Masterca y orders payable to "T			
Fee: \$ C	redit Card No:		Exp. Date:	Credit
Cardholder's Name:		3 Digit Se	curity Code:	
Amount Charged: \$	I agree to pay	the indicated	total amount according to card	issuer agreement:
Cardholder's Signature	:			
	LICENSES ARE NOT T	TRANSFERABLE I	FROM PERSON TO PERSON	
OFFICE USE ONLY:				
	Date Issued		Check No.:	



CREDIT CARD INFORMATION SHEET

(This information is NOT kept on file)

Invoice No.	_
Cardholder's Name:	
Address:	
Credit Card No:	3 Digit Security Code:
Exp. Date:	
Fee: \$	
I agree to pay the indicated total amount	t according to card issuer agreement:
Cardholdor's Signaturo	